

# ANALYSIS OF PHARMACIST INTERVENTIONS DURING THE VALIDATION OF THE ELECTRONIC PRESCRIPTIONS IN A SPANISH HOSPITAL

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## BACKGROUND

Computerized provider-order-entry (CPOE) system is known to improve quality, increase efficiency, and reduce medication errors. The pharmacist, through the electronic validation, can provide improvements to the patient pharmacotherapy. However, not all hospitals follow the same method to make such proposals.

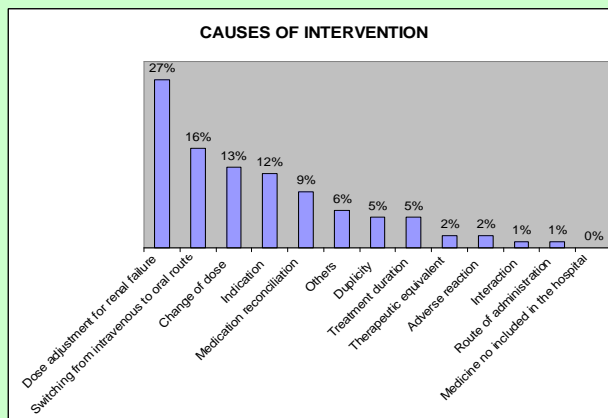
## PURPOSE

To analyse the type of interventions made in our hospital. To validate process intervention.

## MATERIAL AND METHODS

Pharmacists interventions were studied over a period of one year (June 2011-May 2012). Both prescription and validation are performed in the computer program Farmatools®. The pharmacist used to write a warning on the patient treatment. Alerts were reviewed the following day and we checked if the recommendation was accepted or not by the physician. Interventions were classified according to the type of recommendation, the drug and whether it was accepted.

## RESULTS



## MOST FREQUENT DRUGS

|                       |     |
|-----------------------|-----|
| Enoxaparin            | 24% |
| Pantoprazole          | 12% |
| Paracetamol           | 5%  |
| Insulin               | 5%  |
| Digoxin               | 4%  |
| Amoxicilin-clavulanic | 4%  |
| Levofloxacin          | 4%  |

- A total of 788 interventions were analysed (2.2 per day). The most frequent (27%) was dose adjustment for renal failure, followed by switching from intravenous to oral route (16%), change of dose (13%) and indication (12%).
- The most frequent drugs were enoxaparin (24%) and pantoprazole (12%).
- Only 72% of the recommendations were reviewed. From this, 54% were accepted.

## CONCLUSIONS

- Although 788 interventions have been studied, there are many who have not been registered in the program, so it could not be analysed. We observed that the dose adjustment for renal failure, especially enoxaparin, is recorded systematically, but this does not occur with other types of interventions.
- Acceptance is lower than those reported in literature, so we can conclude that the method of communication with the clinician is inadequate and should be strengthened with verbal communication.

